PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  ###/-027												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER	
T	OTAL CLAIMS		32					RATE	FEE	]	RATE	FEE
FC	)R	•	. NUMBER FILED .		NUMBER EXTRA			BASIC F	EE 385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	72 minus 20=		· 17			X\$ 9=	108	OR	X\$18=	
INE	EPENDENT C	LAIMS	7 m	inus 3 =	16			X43=	172	OR	X86=	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	<del></del>	1	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	+	OR OR	TOTAL	
CLAIMS AS AMENDED - PART II								וטוחו	- [665	JOH	OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMAL	LENTITY	OR	SMALL	
AMENDMENT A	8-1-05	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
POM	Total	. 32	Minus	** &	32	=-		X\$ 9=		OR	X\$18=	
ME	Independent	. 7	Minus	***	2			X43=		OR	X86=	·
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1	OR	+290=	
(Column 1) (Column 2) (Column 3)								TOTA		AP	TOTAL	
								ADDIT. FE	E	JOA .	addit. Feel	
B		CLAIMS		HIGHE	ST	PRESENT	ſ		ADDI-	1		ADDI-
N		AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		=	l	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTA ODIT. FEI	L	OR ,	TOTAL: ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT	•	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	44		= .		X\$ 9=		OR	X\$18=	
	Independent				=	l	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=				
٠. إ	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290= TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											ADDIT. FEE	
1	The "Highest Num	ber Previously Paid	For (Total or	Independer	nt) is the	highest numbe	r toui	nd in the a	ppropriate box	in coli	umn 1.	

Application or Docket Number